

## Chris Aquino

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**From:** WMATC E-Filing <administrator@wmatc.gov>  
**Sent:** Tuesday, January 07, 2014 5:22 PM  
**To:** Chris Aquino  
**Subject:** 2014 Annual Report - WMATC No: 1506, Carrier Name: L'Arche, Inc.  
**Attachments:** 52cc7e0e741fb-larche van list for WMATC.docx

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### Washington Metropolitan Area Transit Commission 2014 Carrier Annual Report Form

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#### **FILING INFORMATION:**

- Each carrier holding a WMATC certificate of authority on January 1, 2014, must file a complete 2014 annual report and pay a \$150 annual fee on or before **January 31, 2014**. To be timely, the report and fee must be received at WMATC's office by 4:30 p.m. (or submitted online by 11:59 p.m.) on that date.
- Incomplete annual reports will not be accepted. All fields marked with an asterisk (\*) must be completed. If any information is missing or incorrect, make all necessary corrections.
- Each carrier that fails to file a complete annual report on time will be assessed a **\$150 late fee**. Each carrier that fails to pay the \$150 annual fee on time will be assessed a separate **\$150 late fee**.
- The WMATC operating authority of each carrier that has not filed a complete annual report and paid its annual fee and any assessed late fees will be automatically suspended effective May 2, 2014.
- Filing an annual report containing false information, or omitting information, may result in the assessment of a civil forfeiture.

Read the accompanying instructions carefully before completing this form.

#### **1. ANNUAL REPORT OF:**

**WMATC No.:** 1506

**Name of Carrier (as shown on certificate of authority):** L'Arche, Inc.

**Trade Name:**

**Principal Place of Business**

**Street Address:** 1840 Columbia Road, NW

**Apt./Suite:** 301

**City:** Washington

**State:** DC

**Zip:** 20009

**Mailing Address (if different from street address)**

**Street:** PO Box 21471

**Apt./Suite:**

**City:** Washington

**State:** DC

**Zip:** 20009

**Telephone Number:** (202)510-3212

**Other Telephone:**

**Fax Number:** (202)986-1492

**E-mail:** [donkelly@larche-gwdc.org](mailto:donkelly@larche-gwdc.org)

**2. OTHER PASSENGER CARRIER AUTHORITY** (if applicable, list carrier/permit number):

**USDOT No.:**

**DCTC No.:**

**Virginia DMV passenger carrier No.:**

**Maryland PSC No.:**

**3. CARRIER CONTACT PERSON** (at mailing address to whom we should direct inquiries):

**Name:** Donald Kelly

**Title:** Director of Contract Compliance

**Telephone Number:** (202)510-3212

**Other Telephone:**

**Fax Number:** (202)986-1492

**E-mail:** [donkelly@larche-gwdc.org](mailto:donkelly@larche-gwdc.org)

**4. REGISTERED AGENT INSIDE THE METROPOLITAN DISTRICT FOR SERVICE OF PROCESS**

\*Complete section 4 only if the principal place of business in section 1 is outside the Metropolitan District. The Metropolitan District includes the District of Columbia, Prince George's Co., Montgomery Co., Alexandria Arlington, Fairfax, Falls Church, and Dulles Airport. For a full description, see [www.wmatc.gov](http://www.wmatc.gov).

**Name of Registered Agent for Service of Process:**

**Agent Address:**

**Apt./Suite:**

**City:**

**State:**

**Zip:**

**Telephone Number:**

**E-mail:**

**5. \*CHANGES:** Describe any merger, consolidation or other change in management, ownership, control, or form of organization that occurred after the previous year's annual report was filed, or if not applicable, after the carrier's certificate of authority was issued. If no changes are entered below, the carrier certifies that no such changes have occurred.

No Changes

**6. \*LIST OF REVENUE VEHICLES USED IN WMATC OPERATIONS:** (1) list your vehicles below; or (2) upload a complete vehicle list to this form. Include all required information.

Fleet No.	Year	Make	Vehicle VIN	License Plate	State	Seating Cap.	Wheel Chair

**\*Your vehicle list was attached to your submission.**

**7. \*CERTIFICATION:**

I certify that this report, including any attachments, was prepared by me and under my supervision, that I have examined it, and that the information contained in it is true, correct, and complete as of this date.

**Name:** Donald Kelly

**Title:** Director of Contract Compliance

**Date:** 01/07/2014

L'Arche Inc. Vehicle List January 2014

Van ->	Gray Toyota Sienna Van	Steel Honda Odyssey Van	Silver Honda Odyssey Van
	Ontario	Ontario	Euclid
Year	2009	2006	2013
Make	Toyota	Honda	Honda
Model	Sienna	Odyssey	Odyssey
Serial number (VIN)	5TDZK23C19S265605	5FNRL38276B002277	5FNRL5H49DB051555
Fleet number	N/a	N/a	N/a
License plate number	B43321	B43320	B46395
State	DC	DC	DC
Seating capacity	8	7	8
Wheelchair Accessible?	No	No	No

Handicapped Parking Plaques:

12772AA = John Schofield's